

West Virginia Board of Medicine Quarterly Newsletter

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IMPORTANT NOTICE: Please Read

We have received the following informational notice from the West Virginia Board of Pharmacy:

15 CSR 8. Controlled Substances Monitoring, was promulgated by emergency rule and is in effect currently. Section 5 of the rule, which is enclosed, governs prescription forms for controlled substances (all controlled substances listed in Schedule II, III, and IV) and therefore affects the prescriptive practices of some of your licensees. Of particular importance are the following requirements:

1. Only one prescription shall be written per prescription blank.
2. A prescription shall bear the preprinted, stamped, typed, or manually printed name, address and telephone number of the prescribing practitioner.
3. Prescriptions for controlled substances written after January 1, 2003, shall be on a security prescription blank with certain features as detailed in the rule. Such blanks can be obtained from any printing company or graphics company with the capability of providing blanks that contain the required features and necessary statements and check off boxes. Not all printers are capable of printing latent void patterns or watermarks so practitioners should consult with their printing company about the details and specific requirements in the regulations.
4. If a controlled substance prescription is being faxed to a pharmacy the word "**FAXED**" shall be written or stamped on the face of the original

prescription along with the date and the person's initials. In addition, the original prescription that was faxed must be placed in the patient's record.

5. If a pharmacist receives a prescription that does not conform to the rule, then the pharmacist must refuse to fill it unless the pharmacist determines in his/her professional judgement the immediate necessity for the patient to receive his/her medication. In that case, the pharmacist must contact the prescriber as soon as possible to inform the prescriber that the prescription was not written according to law. If the pharmacist continues to receive prescriptions from the same practitioner that do not comply with the law, then the pharmacist shall inform the Board of Pharmacy who will file a formal complaint with that practitioner's licensing board.

§15-8-5 Prescription Forms

5.1. The purpose of this section is to establish minimum requirements that will decrease the potential for forgery or alteration of a prescription or a prescription blank for a controlled substance.

5.2. After January 1, 2003, a written prescription for a controlled substance shall be on a security prescription blank unless, pursuant to subsection 5.4 of this rule, the Board has granted a waiver to the practitioner who wrote the prescription or to the pharmacy that dispenses it.

5.3. Requirements of a Security Prescription Blank.

5.3.1. A prescription blank shall be four and one-quarter (4 1/4) inches high and five and one-half (5 1/2) inches wide.

5.3.2. A prescription for a controlled substance shall contain the following security features:

(a) A latent, repetitive "void" pattern screened at five (5) percent in pantone green printed across the entire front of the prescription blank. If a prescription is photocopied, the word "void" shall appear in a pattern across the entire front of the prescription;

(b) A watermark printed on the backside of the prescription blank so that it is only seen at a forty-five (45) degree angle. The watermark shall consist of the words "West Virginia Security Prescription", and appear horizontally in a step-and-repeated format in five (5) lines on the back of the prescription using twelve (12) point Helvetica bold type style;

(c) An opaque symbol shall in the upper right-hand corner, one-eighth (1/8) of an inch from the top of the prescription blank and five-sixteenths (5/16) of an inch from the right side of the prescription blank. The symbol shall be three-fourths (3/4) of an inch in size and disappear if the prescription copy is lightened;

(d) Six (6) quantity check off boxes printed on the form and the following quantities shall appear:

(1.) ! 1—24;

(2.) ! 25—49;

(3.) ! 50-74;

(4.) ! 75-100;

(5.) ! 101-150; and

(6.) ! 151 and over;

(e) A logo if desired. The upper left one (1) inch square of the prescription blank shall be reserved for a logo;

(f) The following statement printed on the bottom of the prescription blank: "Prescription is void if more than one (1) prescription is written per blank"; and

(g) Refill options below any logo on the left side of the prescription blank in the following order: Refill NR 1 2 3 4 5.

5.3.3. A prescription shall bear the preprinted, stamped, typed, or manually printed name, address and telephone number of the prescribing practitioner.

5.3.4. A prescription blank for a controlled substance shall not contain:

(a) An advertisement on the front or the back of the prescription blank;

(b) The preprinted name of a controlled substance; or

(c) The written, typed, or rubber-stamped name of a controlled substance until the prescription blank is signed, dated and issued to a patient.

5.3.5. A prescription blank for a controlled substance shall provide space for the patient's name and address, the practitioner's signature and the practitioner's DEA registration number.

5.3.6. Only one (1) prescription shall be written per prescription blank.

5.3.7. A quantity check-off box that corresponds to the quantity prescribed shall be marked.

5.3.8. If a prescribed drug is a schedule III, IV or V controlled substance, a refill option shall be marked.

5.3.9. If a prescription for a schedule III, IV, or V controlled substance will be transmitted to a pharmacy by facsimile, the practitioner or the practitioner's agent shall, prior to transmission, write or stamp "FAXED" on the face of the original prescription along with the date and the person's initials.

5.3.10. If a pharmacist uses due diligence in ascertaining the validity of a prescription, a prescription for a schedule III, IV, or V controlled substance that is transmitted to a pharmacy by facsimile is exempt from the requirement of green ink in paragraph 5.3.1(a) of this rule and the requirement of a watermark in paragraph 5.3.1(b) of this rule.

5.3.11. If a prescription for a schedule III, IV or V controlled substance has been transmitted to a pharmacy by facsimile, the transmitting practitioner shall file the original prescription in the patient's record.

5.3.12. A pharmacist shall not be required to use a security prescription blank to record an oral prescription or a transferred prescription for a Schedule III, IV, or V controlled substance.

5.3.13. If a pharmacist receives a prescription for a controlled substance that is not in compliance with this rule, then the pharmacist shall refuse to fill the prescription. Provided, that if the pharmacist in his or her professional judgement determines the immediate necessity for the patient to receive his or her medication, then the prescriptions may be dispensed and the pharmacist shall document in a log the prescription numbers and drugs dispensed. This log shall be kept in the pharmacy and be available for inspection. The pharmacist shall contact the prescriber as soon as possible to inform them that the prescription was not written according this rule. If the pharmacist continues to receive prescriptions from the same practitioner that do not comply with this rule, then the pharmacist shall inform the Board.

5.3.14. The requirements of this section do not apply to prescriptions for controlled substances that are electronically transmitted from a prescriber to a pharmacy: Provided, That all electronically transmitted prescriptions for controlled substances shall comply with all federal requirements.

5.4. Waiver of Security Prescription Blanks.

5.4.1. A practitioner or a pharmacy may apply in writing to the Board for a waiver from the requirement for security prescription blanks. A request for a waiver shall include:

(a) A detailed statement of the security features provided by the system proposed by the applicant for the prevention of forgery or alteration of an original prescription; or

(b) The format of the alternative prescription blank.

5.4.2. The system or prescription blank proposed by the applicant shall provide a level of security equivalent to a security prescription blank.

5.4.3. The board shall grant or deny the application in writing within sixty (60) days after the request is received.

5.4.4. When a waiver has been granted, the Board may suspend or revoke the waiver if the alternative system or alternative prescription blank does not provide security equivalent to a security prescription blank.

5.4.5. Upon notification of denial, suspension, or revocation of the waiver of the requirement for a security prescription blank, the practitioner or pharmacy may make a written request for a hearing before the Board.

For more information pertaining to the preceding rule, you may contact the WV Board of Pharmacy at
304/558-0558.

WEST VIRGINIA CONTROLLED SUBSTANCE SECURITY PRESCRIPTION BLANK

THE FOLLOWING INFORMATION WAS PROVIDED BY THE
WEST VIRGINIA BOARD OF PHARMACY:

Frequently Asked Questions

Q. Is there a list of approved printers to provide the blanks?

A. No, any printer capable of providing the required features and information on the blank may be used. The Board is not restricting you to using certain printers.

Q. When does this requirement go into effect?

A. The regulation states it goes into effect January 1, 2003, but the Board will inform pharmacists that they may continue to fill controlled substance prescriptions that are written on non-compliant blanks until March 1, 2003, to allow a grace period to obtain new blanks.

Q. What does the regulation mean by an opaque symbol in the upper right hand corner?

A. That is actually supposed to say an opaque “Rx” symbol. The “Rx” symbol is what is required in the upper right hand corner of the blank.

Q. Are these blanks required for all prescriptions I write?

A. No, it is only required for outpatient prescriptions and only for controlled substances listed in Schedule II, III, or IV, not for antibiotics, etc. To see a list of controlled substances go to www.deadiversion.usdoj.gov/schedules/. The blanks may be used for all of your prescriptions but must be used for the controlled substances.

Q. Does this eliminate any other requirement for information that must be on my blanks; such as the categories of drugs a PA may prescribe from a list on the back?

A. No, any information that has been required on your blanks still must be there. This only requires that certain other features and printed info must be on any blanks used for writing controlled substances.

Q. If my printer says that the void pattern is screened slightly different than 5 percent or is not in green ink, is that okay?

A. Yes, as long as the intent of the regulation is met in that anytime the prescription blank is copied the word “Void” appears across the prescription.

Q. If there are several practitioners at one facility, may we have blanks printed with all their names and then write down the DEA number and circle the name of the doctor when each individual doctor is prescribing?

A. Yes, as long as the DEA number is legible and the name of the prescriber is clearly distinguishable.

Q. Is the exclamation point required to be printed with the quantity check-off boxes?

A. No, that is not meant to be printed on the blank, it is only a mark in the rule to distinguish the different number sets.

Board Member Profile

Patricia Ann Hussey

In November, 2002, Governor Wise appointed Patricia Ann Hussey to fill one of the three consumer positions on the Board of Medicine. Ms. Hussey has for more than twenty years been a Co-Director of Covenant House in downtown Charleston, a center for those with few resources and in need of assistance of all kinds. Ms. Hussey's duties include crisis intervention counseling, advocacy, public speaking and education, case management, hiring and supervision of personnel, grant writing, fundraising and program development. In 2001-2002, she co-directed and raised \$2.25 million dollars for the Covenant House's Capital Campaign, resulting in a new building for Covenant House.

Ms. Hussey was a Sister of Notre Dame from 1967 through 1988. She obtained her B.S. in Special Education from Southern Ct. State College in New Haven in 1972. In 1979 she received her Masters of Divinity from the Jesuit School of Theology in Chicago, Illinois. She was a jewelry factory worker in Providence, Rhode Island, for the next two years, before moving to West Virginia, and while in Providence, she

volunteered at Advent House, a shelter for the homeless, as well as volunteered on a hotline for battered women. Since 1986, Ms. Hussey has been a licensed certified Social Worker in West Virginia.

Ms. Hussey has been involved in the formation of numerous organizations, including the Coalition for the Homeless in the Kanawha Valley, a free health clinic in Charleston: West Virginia Health Right, and the first family, women and children's shelter for the homeless in Charleston: Sojourner's Shelter. Her professional affiliations are numerous as well, including Catholics for a Free Choice, Charleston East Community Development Corporation, Coalition against Apartheid, Community Council of Kanawha County, Kanawha Valley Collective, NAACP, West Virginia FREE, NOW, Women and Employment, West Virginia State AIDS Task Force, Fellowship for Reconciliation, Central American Human Rights Coalition, and the Mayor's Task Force on Homelessness. She has won several awards over the last sixteen years and was the co-author with Barbara Ferraro of No Turning Back: Two Nuns Battle with the Vatican over A Woman's Right to Choose, published by Poseidon Press of Simon and Schuster. The book won the 1990 Book of the Year Award of the West Virginia Library Association.

Ms. Hussey's home is in Lincoln County, West Virginia.

BOARD ACTIONS OCTOBER 2002 – DECEMBER 2002

DISCIPLINARY ACTIONS

ASLI, REZA PARIVASH, M.D. – Wheeling, WV (12/16/02)

WV License No. 09229

Board Finding: Relating to professional incompetence; unprofessional conduct; malpractice; and conduct having the effect of bringing the medical profession into disrepute.

Board Action: Dr. Asli's license shall remain in INACTIVE STATUS, and he shall not practice medicine and surgery in West Virginia during the pendency of the inactive status of his license.

BALI, AHMAD, M.D. – South Charleston, WV (11/19/02)

WV License No. 21044

Board Finding: Relating to presenting a false statement in connection with an application for a license.

Board Action: Dr. Bali has met the requirements for the issuance of a license to practice medicine and surgery in the State of West Virginia and was granted a license effective November 19, 2002. Dr. Bali was PUBLICLY REPRIMANDED for providing inaccurate information to the Board on his licensure application submitted to the Board in August, 2002.

DAUITO, RALPH, M.D. – Millville, NJ (11/07/02)

WV License No. 15014

Board Finding: Relating to action upon his license in another state.

Board Action: Shall continue to comply with the terms and conditions imposed by the New Jersey Board of Medical Examiners.

LITTLE, PAUL MICHAEL, JR., M.D. – Oro Valley, AZ (12/23/02)

WV License No. 18440

Board Finding: Relating to the inability to practice medicine and surgery with reasonable skill and safety due to abuse of drugs.

Board Action: The suspension of Dr. Little's license previously ordered is stayed; the probation of three (3) years is held in abeyance; and Dr. Little's license is placed on INACTIVE STATUS effective December 23, 2002.

MCINTOSH, MICHAEL, M.D. – Parkersburg, WV (12/03/02)

WV License No. 12366

Board Finding: Relating to having been subjected to disciplinary action by the licensing authority of another state.

Board Action: By AMENDED CONSENT ORDER dated December 3, 2002, Dr. McIntosh's November, 2000, CONSENT ORDER was amended to include an extension of his probationary status from a period of two (2) years to a period of three (3) years.

ROSS, MICHAEL REIFF, M.D. – Hilliard, OH (11/07/02)

WV License No. 16856

Board Finding: Relating to having disciplinary action taken against his license in another state.

Board Action: Shall continue to comply with the terms and conditions imposed by the North Carolina Medical Board.

WALKUP, HARRY E., JR., M.D. – Mt. Olive, WV (11/07/02)

WV License No. 13026

Board Finding: Convicted of a crime which is a felony and engaging in unprofessional, unethical, and dishonorable conduct which has the effect of bringing the medical profession into disrepute.

Board Action: License revoked effective November 15, 2002, and shall pay to the Board the administrative costs of the proceeding.

LICENSES DENIED

VEMURI, DWARKA NATH, M.D. – Wheeling, WV (11/07/02)

WV License No. 17571

Board Finding: Unqualified to practice medicine and surgery in the State of West Virginia.

Board Action: The Board AFFIRMED its September 14, 2001, DENIAL of the February, 2001, application of Dwarka Nath Vemuri, M.D., for a license to practice medicine and surgery in the State of West Virginia.

BOARD EMPLOYEES

The Board of Medicine welcomes a new staff member. Ms. Teri Wolfe is the Board's Verification Coordinator. She previously worked for a physical therapy company in St. Albans, West Virginia.

Ms. Sherry Kelly, a faithful employee of the Board for over 13 years, has resigned as the Board's Complaints Coordinator. Sherry is going to stay at home and care for her only grandchild, Sydnee. Sherry will be missed by all.

PHYSICIAN ASSISTANT RENEWALS 2003

In mid-February 2003, licensure renewal applications will be mailed certified to all physician assistants. Renewal applications will be mailed to the address of record on file at the Board office. The address of record is the address designated by each physician assistant as his or her preferred mailing address. It is the responsibility of the licensee to keep this office apprised of any address change. In the event of a change of address, the licensee must notify the Board of the change, in writing.

For a physician assistant license to remain valid and in force, the fully completed renewal application and fee must be RECEIVED in the Board office BEFORE Monday, March 31, 2003, at 5:00 p.m. The physician assistant's license will be suspended if the required continuing medical education has not been obtained (see related article below).

In order to avoid automatic suspension of a physician assistant license, a physician assistant must either complete the six-page renewal application to renew the license or the one-page certification included in the renewal packet to lapse/expire the license. This information must be completed and RECEIVED in the Board office BEFORE Monday, March 31, 2003.

If a licensee does not receive a renewal application, it is his or her responsibility to inform the Board and to request a duplicate. Illegible and incomplete applications, as well as those received without the fee, will be returned. The Board will be unable to finalize the processing of any application that is not complete. Completion of the renewal application is the responsibility of the licensee.

Renewal applications for this year have been revised to simplify the renewal process. Every application will be computer-generated to include personalized information previously reported by the physician assistant. However, each licensee will need to review this information to ensure that it remains accurate. The Board anticipates that this new method of renewal will reduce the time necessary for the physician assistant to complete the application.

CONTINUING MEDICAL EDUCATION FOR PHYSICIAN ASSISTANTS

Pursuant to 11 CSR 1B 15, in order to acquire continuing education satisfactory to the Board, a physician assistant shall provide written documentation of participation

in and successful completion during the preceding two (2) year period of a minimum of forty (40) hours of continuing medical education designated as Category I by either the American Medical Association, American Academy of Physician Assistants or the Academy of Family Physicians, **AND** sixty (60) hours of continuing education designated as Category II by the association or either academy, which one-hundred (100) hours must include two (2) hours of continuing education coursework in the subject of end-of-life care including pain management, as described in West Virginia Code §30-1-7a. The written documentation may consist of a current NCCPA certificate, plus documentation of the two (2) hours of end-of-life care including pain management.

For those individuals who are not NCCPA certified, written documentation shall consist of original certificates from the entities named above, evidencing participation in and successful completion of the forty (40) hours and the sixty (60) hours both as described above, which one-hundred (100) hours must include two (2) hours of continuing education coursework in the subject of end-of-life care including pain management, as described in West Virginia Code §30-1-7a.

There are no other types or categories of continuing medical education for physician assistants satisfactory to the Board.

West Virginia Board of Medicine Board Members

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Lee Elliott Smith, M.D. Princeton	John A. Wade, Jr., M.D. Point Pleasant
Kenneth Dean Wright, P.A.-C. Huntington	

Ext #	Staff of the West Virginia Board of Medicine (304) 558-2921	
227	Ronald D. Walton, M.A.	Executive Director
214	Deborah Lewis Rodecker, J.D.	Counsel
212	M. Ellen Briggs	Administrative Secretary to the Executive Director
222	Leslie A. Higginbotham	Paralegal and Investigator
215	Lynn Hill	Information Systems Coordinator
210	Charlotte A. Jewell	Receptionist/Physician Assistant Coordinator
221	Crystal Lowe	Licensure Analyst
211	Janie Pote	Administrative Secretary to Legal Department
220	Deb Scott	Fiscal Officer
224	Teri Wolfe	Verification Coordinator

WV Board of Medicine



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WEST VIRGINIA BOARD OF MEDICINE 2003 MEETINGS

January 13
March 10
May 12
July 14
September 8
November 10

NEWSLETTER VIA E-MAIL REQUEST FORM

- ☐ Yes, I would like to receive my newsletter via e-mail instead of U.S. mail
(Please check the box)

Name of Licensee: _____ **WV License No:** _____

E-mail Address: _____ (i.e. user@domain.com)

Signature: _____ **Date:** _____

Original Signature of Licensee is Required

CHANGE OF ADDRESS FORM

WV License No: _____ **Date of Change:** _____

Name of Licensee: _____

PLEASE CHECK ONLY ONE PREFERRED MAILING ADDRESS:

(The preferred mailing address is the licensee's address of record, which is public information.)

(Note that telephone numbers are not considered public information.)

() Principal Office or Work Location *ONLY CHECK ONE* () Home Address

Telephone: _____

Telephone: _____

Signature: _____

Date: _____

Original Signature of Licensee is Required

Mail completed form(s) to:

West Virginia Board of Medicine
101 Dee Drive · Charleston, WV 25311

Fax copies not accepted.

By law, you must keep this office apprised of any and all address changes